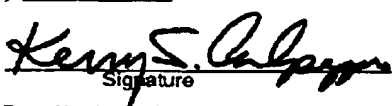


RECEIVED

CENTRAL FAX CENTER 37079112

p.3

OCT 02 2006

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 01-100-DIV															
In re Application of HIMI et al.																	
Application Number 10/716,606		Filed: 11/20/2003															
For: METHOD FOR MANUFACTURING SEMICONDUCTOR SUBSTRATE																	
Group Art Unit 2813	Examiner Thanhha S. PHAM																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tbody><tr><td><input checked="" type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$ 120.00</td></tr><tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$ 450.00</td></tr><tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$ 1020.00</td></tr><tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$ 1,590.00</td></tr><tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$ 2,160.00</td></tr></tbody></table> <p><input type="checkbox"/> Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p>A small entity statement under 37 CFR 1.27:</p> <p><input type="checkbox"/> _____ is enclosed.</p> <p><input type="checkbox"/> _____ has already been filed in this application.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-1147</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____</p> <p>Date <u>2 October 2006</u></p> <p> Signature</p> <p>Kerry S. Culpepper (Reg. No. 45,672)</p> <p>Typed or printed name</p>			<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 120.00	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 450.00	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 1020.00	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ 1,590.00	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ 2,160.00
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 120.00															
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 450.00															
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 1020.00															
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ 1,590.00															
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ 2,160.00															

10/03/2006 00000057 501147 10716606

01 FC:1251 120.00 DA

OCT 02 2006

**FEE TRANSMITTAL**

<b>FEE TRANSMITTAL</b>	Application Number	10/716,606	
	Filing Date	11/20/2003	
	First Named Inventor	HIMI	
	Examiner Name	Thanhha S. PHAM	
	Art Unit	2813	
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Attorney Docket No.	01-100-DIV
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$)	120

**METHOD OF PAYMENT (check all that apply)**

- ☐ Check    ☐ None    ☐ Other (please identify):
- ☒ Deposit Account    Deposit Account Number: 50-1147    Deposit Account Name: Posz Law Group, PLC  
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    ☒ Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=				

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ \_\_\_\_\_ (\$ for small entity)  
 for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Petition for 1-month extension of time

120

**SUBMITTED BY**

Signature	<i>Kerry S. Sulpepper</i>	Registration No. (Attorney/Agent)	45,672	Telephone	(703) 707-9110
Name (Print/Type)	Kerry S. Sulpepper	Date	2 October 2006		